

## STATE OF MICHIGAN DEPARTMENT OF EDUCATION LANSING



# FISCAL YEAR 2007 CHILD AND ADULT CARE FOOD PROGRAM OPERATIONAL MEMORANDUM #13

**TO:** Child and Adult Care Food Program Institutions

FROM: Mary Ann Chartrand, Director

Grants Coordination and School Support

**DATE:** September 27, 2007

**SUBJECT: Medical Exception Statement for Food Substitution** 

The Child and Adult Care Food Program (CACFP) regulations require all institutions to offer breakfasts, lunches, suppers and snacks which meet the meal patterns identified in the regulations. The United States Department of Agriculture (USDA) has issued an instruction (FNS Instruction 783-2 Rev. 2) that sets forth the policy for food substitutions for medical or other special dietary reasons. When meal substitutions are requested for eligible participants, the Medical Exception Statement for Food Substitution must be completed and on file at the institution.

#### Child with a Disability

A child, with a disability, as defined in 7CFR Part 15b, (see attached) is one who has "...a physical or mental impairment which substantially limits one or more major life activities..." Major life activities are defined to include functions such as "caring for one's self, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning and working." Institutions and sponsors are required to make substitutions in foods listed in the meal pattern for those children with disabilities who are unable to consume specified food items.

A child with a disability shall be provided food substitutions only when the Medical Exception Statement for Food Substitution form is completed by a physician licensed by the State. The Medical Exception Statement shall identify:

- the individual's disabling condition, and an indication that the disability restricts the child's diet;
- the major life activity affected by the disabling condition;
- the food or foods to be omitted from the child's diet; and
- the food or choice of foods that must be substituted.

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Generally, children with food allergies or intolerances, or obese participants are not considered a child with a disability as defined in 7 CFR 15b.3(i). When faced with a request for special meals for such children, the physician must concur that the food allergies may result in severe, life-threatening reactions, or the obesity is severe enough to substantially limit a major life activity, the child then meets the definition of "handicapped person" and the substitution prescribed by the physician must be made. Institutions should use the services of a registered dietitian to assist in implementing the medical statement, as appropriate.

#### Child without a Disability

Institutions may, at their discretion, make substitutions for individual children without disabilities, as defined in 7CFR Part 15b, but who are unable to consume a food item because of medical or other special dietary needs. A child without a disability shall be provided substitutions in food only when the Medical Exception Statement for Food Substitution is completed by a recognized medical authority. A recognized medical authority may include a physician licensed by the State, physician's assistant, nurse practitioner, or registered dietitian.

For children, without disabilities, the supporting statement shall identify:

- the medical or other special dietary need that restricts the child's diet;
- the food or foods to be omitted from the child's diet; and
- the food or foods that may be substituted.

#### Reimbursement and Availability of Substitutions

Reimbursement for meals served with an authorized substitute food shall be claimed at the same rate as meals which meet the regular meal pattern. There shall not be an additional charge to the child for the substituted food.

#### Accessibility

Accessibility for children with disabilities must be accommodated:

- in the dining area;
- with adaptive feeding equipment; and
- by providing aides to feed children with disabilities.

All of the above costs are considered allowable costs. However, no additional CACFP reimbursement is available.

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Attached is the Medical Exception Statement for Food Substitution form. This form must be used for all medical or special dietary needs for children with or without a disability receiving CACFP meals/snacks. Keep each completed form signed by the physician or recognized medical authority on file at your institution. Note that food substitutions for children with non-disabling food allergies may be provided by the institution. However, children with a disability (as defined above) must be provided food substitutions/modifications as prescribed by the physician.

If you have any questions, please call the CACFP at (517) 373-7391.

Please keep this memorandum on file or in a notebook for quick and easy reference.

Attachments: Medical Exception Statement for Food Substitution

Food and Nutrition Service (FNS) Instruction 783-2 Rev. 2

### **Medical Exception Statement for Food Substitution**

Dear Parent/Guardian	Dear	r Parent	:/Guard	dian:
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snac a ph com at I	ks meetir ysician's pleted for	on participates in the Child and Adult Care Food Program (CACFP) on the CACFP requirements. Food substitutions may be made only statement. Please ask your physician to complete and sign this form to the institution. If you have any questions, please contact mention in Phone Number	y when supported by orm. Return the		
51110	C1 C1 y y				
Ir	stitution	Contact Person			
Child	d's Name	Date _			
Com	nplete Al	I Information			
1.	<ol> <li>Does the child have a disability according to 7CFR Part 15b.3 (see definitions on the back form)?</li> <li>Yes – If yes, provide the following information and complete questions 3, 4, and 5.</li> </ol>				
	a.	What is the disability?			
	b.	How does the disability restrict the diet?			
	C.	What major life activity is affected?			
	□ No -	If no, proceed to question 2.			
2.		If a child has no disability but has special dietary needs, identify the medical problem which restricts the child's diet, and complete questions 3, 4, and 5.			
3.	List food/type of food to be omitted.				
4.	List food/type of food to be substituted.				
5.					
		Signature*	Date		

<sup>\*</sup> Child with a disability – physician's signature only \* Child without a disability – recognized medical authority signature

### Definition of Handicapped Person (person with a disability) 7CFR Part 15b.3 Definitions

- (i) "Handicapped person" means any person who has a physical or mental impairment which substantially limits one or more major life activities, has a record of such an impairment, or is regarded as having such an impairment.
- (j) "Physical or mental impairment" means (1) any physiological disorder or condition, cosmetic disfigurement, or anatomical loss affecting one or more of the following body systems: neurological; musculoskeletal; special sense organs; respiratory, including speech organs; cardiovascular; reproductive; digestive; genitourinary; hemic and lymphatic; skin; and endocrine; or (2) any mental or psychological disorder, such as mental retardation, organic brain syndrome, emotional or mental illness, and specific learning disabilities. The term "physical or mental impairment" includes, but is not limited to, such diseases and conditions as orthopedic, visual, speech, and hearing impairment; cerebral palsy; epilepsy; muscular dystrophy; multiple sclerosis; cancer; heart disease; diabetes; mental retardation; emotional illness; and drug addiction and alcoholism.
- (k) "Major life activities" means functions such as caring for one's self, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning and working;

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